AME	Docket No. 0234-0515PUS1											
Applicatio		Filing (		Examiner		Art Unit						
10/579,741-Co		March 23, 2007 L. D. Bland				1623						
Applicant(s): Toshitaka FUNAZUKURI et al.												
Invention: METHOD OF HYDROLYZING AN ORGANIC COMPOUND												
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450												
Transmitted herewith is an amendment in the above-identified application.												
The fee has been calculated and is transmitted as shown below.  CLAIMS AS AMENDED												
	Claims Remaining After	Highest Number Previously	Number Extra Claims	DED								
Total Claims	Amendment 8	Paid - 20 =	Present 0	х	Rate 25.00		0.00					
Independent	2	- 3 =	0	x	105.00		0.00					
Claims			a) []	l								
Multiple Dependent Claims (check if applicable)												
Other fee (pleas	e specify): E	xtension for res	ponse within f	irst mon	th		60.00					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 60.00												
Large Entity X Small Entity												
No additional fee is required for this amendment.												
X Please char A duplicate	ge Deposit Acc			n the ar	mount of \$ _	60.0						
_ `	he amount of \$			sed.								
Payment by credit card. Form PTO-2038 is attached.  X The Director is hereby authorized to charge and credit Deposit Account No02-2448 as described below. A duplicate copy of this sheet is enclosed.												
x Credit any overpayment.												
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.												
Dated: April 14, 2008												
Marc S. Weine Attorney Reg. I						•						
BIRCH, STEW 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8000	se Road /irginia 22040-		LP									

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
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Effective	on 12/08/2004.		Complete if Known									
Fees pursuant to the Consolidate	Application Number 10		10/579,741-Conf. #8885									
FEE TRA	Filing Date M		March 23, 2007									
For F	First Named Inv	Named Inventor Toshitaka FU			VAZUKURI							
<u> FOI r</u>	Examiner Name		L. D. Bland	D. Bland								
X Applicant daims small e	Art Unit		623									
TOTAL AMOUNT OF PAYMEN	Т	(\$) 60.00	Attorney Docket No. 0234-0515PUS1									
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION												
1. BASIC FILING, SEARCH,	AND EXAM	INATION FEES										
			ARCH FEES	EXAMI	NATION FEES							
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)					
Utility	310	155 510	255	210	105							
Design	210	105 100	50	130	65							
Plant	210	105 310	155	160	80							
Reissue	310	155 510	255	620	310							
Provisional	210	105 0	0	0	0							
2. EXCESS CLAIM FEES			J	Ū	v		Small Entity					
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$)												
Each claim over 20 (includir		50	25									
Each independent claim over		210	105									
Multiple dependent claims						370	185					
<u>Total Claims</u> Extra C	luitiple Depende	nt Claims										
8 - 20 = 0	.00 <u>Fee (\$)</u>			Fee Paid (\$)								
HP = highest number of total clain	ns paid for, if gr	eater than 20.					_					
Indep. Claims												
20			.00									
HP = highest number of independent	ent claims paid	for, if greater than 3.										
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1												
sheets or fraction thereo				OI SIIIUII V	omity) for each ac	aditional 50						
	ra Sheets		dditional 50 or frac	ction there	of Fee (\$)	Fee P	aid (\$)					
100 = /50 = (round up to a whole number) x =												
4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing sur	1	60.00										
SUBMITTED BY		•										
Signature Registration No. (Altorney/Agent) 32,181 Telephone (703) 205-80							5-8000					
Name (Print/Type) Marc S. Weiner						April 14, 2008						